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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|--|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Khafilu | |
| | | First name | First name |
| | Write the name that is on | M | |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's | Oshodi | |
| | license or passport | Last name | Last name |
| | Bring your picture | | |
| | identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| _ | | | |
| 2. | All other names you have used in the last | First name | First name |
| | 8 years | Thethane | THOCHAIN |
| | - , | Middle name | Middle name |
| | Include your married or maiden names. | | |
| | maiden names. | Last name | Last name |
| | | | |
| | | First name | First name |
| | | | |
| | | Middle name | Middle name |
| | | l saturana | Lest name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- <u>8630</u> | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer | 9 xx - xx- | 9 xx - xx- |
| | Identification number (ITIN) | | |

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| Debtor 1 Khafilu First Name | M Middle Name | Oshodi Last Name | Case number (if known) | _ |
|--|--|------------------------------|--|----|
| | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): | |
| 4. Any business names and Employer | I have not used any business | s names or EINs. | I have not used any business names or EINs. | |
| Identification Numbers (EIN) you have used in the last | Business name | | Business name | |
| 8 years Include trade names and | Business name | | Business name | |
| doing business as names | EIN | | EIN | _ |
| | EIN | | EIN | _ |
| 5. Where you live | | | If Debtor 2 lives at a different address: | Π |
| | 515 Lakewood Terrace Number Street | | Number Street | _ |
| | Round Lake Illinois City State | 60073 Zip Code | City State Zip Code | _ |
| | Lake | | | |
| | County If your mailing address is diff above, fill it in here. Note that notices to you at this mailing add | the court will send any | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | |
| | Number Street | | Number Street | _ |
| | City State | Zip Code | City State Zip Code | _ |
| 6. Why you are choosing this district | Check one: | | Check one: | |
| to file for bankruptcy | Over the last 180 days before lived in this district longer that | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | |
| | I have another reason. Explain | in. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408 | .) |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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| De | ebtor 1 Khafilu | M | Oshodi | _ Case number (if kn | own) | | |
|-----|---|---|---|----------------------------------|--|--|--|
| | First Name | Middle Name | Last Name | | | | |
| Pa | rt 2: Tell the Court Abo | out Your Bankruptcy Ca | ase | | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | description of each, see <i>Notice R</i> 0)). Also, go to the top of page 1 a | | C. § 342(b) for Individuals Filing for opriate box. | | |
| 8. | How you will pay the fee | ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals to Pay Your Filing Fee in Installments</i> (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). I you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition. | | | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | Yes. District District District | Wh Wh | MM / DD / YYYY en MM / DD / YYYY | Case number Case number Case number | | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | <u>W</u> h | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known | | |
| 11. | Do you rent your residence? | ✓ No. Go to | line 12. | | o you want to stay in your residence? st You (Form 101A) and file it with | | |

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Debtor 1 Khafilu Oshodi M __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Khafilu
 M
 Oshodi
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Khafilu Oshodi M Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Khafilu Oshodi Signature of Debtor 1 Signature of Debtor 2 Executed on _ 3/13/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Khafilu | М | Oshodi | Case number (if) | known) |
|--|---------------------------|-----------------------|------------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | uired by 11 U.S.C. § | 342(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge afte | r an inquiry that the | information in the sched | ules filed with the petition is incorrect. |
| attorney, you do not | 4 | . , | | · |
| need to file this page. | /s/ Nathan Delman | | Date | 3/13/2017 |
| | Signature of Attorney | for Debtor | M | M / DD / YYYY |
| | | | | |
| | | | | |
| | Nathan Delman | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 5101 Washington Str | eet | | |
| | Street | | | |
| | Unit 29 | | | |
| | | | | |
| | Gurnee | | Illinois | 60031 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3124473700 | Email address | ndelman@semradlaw.com |
| | | | _ | |
| | 6296205 | | Illinois | <u> </u> |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|----------------------|---|--|--|--|--|
| Debtor 1 | Khafilu | M | Oshodi | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | , | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | | |
| | | | (State) | | | | | |
| Case number (If known) | | | | | | | | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | · |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$3,550.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$3,550.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | amount jou one |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$36,265.00 |
| Your total liabilities | \$36,265.00 |
| art 3: Summarize Your Income and Expenses | |
| | |
| . Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,188.00 |
| | |
| . Schedule J: Your Expenses (Official Form 106J) | |

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Debtor 1 Khafilu Oshodi M _ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,193.00 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | information | to identify your o | case: | | | | | |
|-----------------------|--|---|--|----------------------------|--|--|---|---|
| Debtor 1 | Khafil | | M | | Oshodi | | | |
| Debtor 2 | First N | | Middle N | | Last Name | | | |
| (Spouse, if f | - 111501 | Name tcy Court for the: | Middle N Northern | lame | Last Name District of Illinois | | | |
| Case nun | • | toy dount for the. | Northern | | (State) | | | |
| (If known) | | | | | | | | Chapte if this is an |
| Officia | al Form | 106A/B | | | | | | Check if this is an amended filing |
| Sche | dule A | /B: Prope | erty | | | | | 12/1 |
| category responsib | where you the le for supply r name and | hink it fits best. ring correct infor case number (if l | Be as complete a rmation. If more s known). Answer e | nd acc pace i very q | asset only once. If an asset fits in m curate as possible. If two married po s needed, attach a separate sheet uestion. Other Real Estate You Own or | eople are to this fo | e filing together, both a orm. On the top of any a | are equally |
| 1. Do yo | u own or hav | e any legal or e | quitable interest | in any | residence, building, land, or simila | r propert | y? | |
| ✓ | No. Go to F | | | | | | | |
| | Yes. Where | is the property? | | | | | | |
| 1.1 | | | | | t is the property? Check all that apply Single-family home | y. | the amount of any secu | claims or exemptions. Put ired claims on <i>Schedule D:</i> |
| | Street address, if available, or other description | | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | | | | ims Secured by Property. | |
| | | | | | | Current value of the current value of the entire property? portion you own? | | |
| | - | | | ш | and | | | |
| | Number | Street | | | nvestment property | | Describe the nature of interest (such as fee s | |
| | City | State | Zip Code | | imeshare Other | | the entireties, or a life | e estate), if known. |
| | | | | one. | has an interest in the property? Ch | neck | Check if this is co (see instructions) | ommunity property |
| | | | | | Debtor 1 only Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 only | | | |
| | | | | ш | at least one of the debtors and another | | | |
| | | | | | r information you wish to add abou erty identification number: | t this ite | m, such as local | |
| If you | own or have | e more than one, I | ist here: | \A/I | t in the more manta. O Observe all the standard | | Do not dodinat account | alaine an anna ations Dut |
| 1.2 | | | | | t is the property? Check all that apply Single-family home | y. | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: |
| | Street addre | ess, if available, or | other description | | Ouplex or multi-unit building | | Current value of the | ims Secured by Property. Current value of the |
| | | | | | Condominium or cooperative Manufactured or mobile home | | entire property? | portion you own? |
| | - | | | | and | | | - - |
| | Number | Street | | | nvestment property | Describe the nature of your ownership interest (such as fee simple, tenancy by | | |
| | City | State | Zip Code | | imeshare Other | | the entireties, or a life | e estate), if known. |
| | | | | Who one. | has an interest in the property? Ch | ieck | Check if this is co (see instructions) | ommunity property |
| | | | | | Debtor 1 only | | - | |
| | | | | | Debtor 2 only Debtor 1 and Debtor 2 only | | | |
| | | | | | at least one of the debtors and another | r | | |
| | | | | Oth | r information you wish to add abou | t this ita | m such as local | |

property identification number:

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| Debtor 1 | Khafilu First Name | M Middle Name | Oshodi Last Name | Case numbe | r (if known) | _ |
|-----------------------------|---|-------------------------------------|---|------------------|---|---|
| | et address, if available, or othe | [| What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | apply. | the amount of any secu Creditors Who Have Class Current value of the entire property? Describe the nature of interest (such as fee states) | imple, tenancy by |
| City | State |] [] [| Who has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Other information you wish to add | other | (see instructions) | mmunity property |
| | the dollar value of the porti ve attached for Part 1. Writ | on you own for a e that number h | all of your entries from Part 1, inclere. | uding any entrie | s for pages | |
| Do you ow you own th | nat someone else drives. If youns, trucks, tractors, sport utilit | u lease a vehicle, | t in any vehicles, whether they are also report it on Schedule G: Executo cycles | - | - | |
| 3.1 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| | | | At least one of the debtors at Check if this is community instructions) | property (see | | <u> </u> |
| 3.2 | Make Model: Year: | | Who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims <i>Secured by Property.</i> |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions) | | Current value of the entire property? | Current value of the portion you own? |

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| | Khafilu First Name | M Middle Name | Oshodi Last Name | Case numbe | er (if known) | |
|-----|---|------------------|---|---|---|--|
| 3.3 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions) | nly rs and another | the amount of any secu | claims or exemptions. Pured claims on Schedule ired claims on Schedule ims Secured by Property Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is communication. | nly rs and another | the amount of any secu | claims or exemptions. Pured claims on Schedule aims Secured by Property Current value of the portion you own? |
| | | | recreational vehicles, other fishing vessels, snowmobiles, | · | | |
| 4.1 | | | Who has an interest in the | · | Do not deduct secured | claims or exemptions. Pi |
| | Yes | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor | property? Check Inly as and another | | red claims on <i>Schedule</i> |
| 4.1 | Yes Make Model: Year: Approximate mileage: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on | property? Check hly as and another hity property (see | Do not deduct secured the amount of any secu <i>Creditors Who Have Cla</i> Current value of the | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule |

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Oshodi Debtor 1 Khafilu Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$750.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... x4 televisions; x1 laptop \$450.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1450.00 for Part 3. Write that number here

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Oshodi

Debtor 1 Khafilu Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$1500.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$0.00 17.1. Checking account: Citibank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Khafilu | М | Oshodi | Case number (if known) | |
|------|---|--|-----------------------------|--|---|
| | First Name | Middle Name | Last Name | | |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe | checks, promissory not | es, and money orders. | |
| | | | | | |
| 21. | | | , thrift savings accounts | , or other pension or profit-sharing plans | |
| | ✓ No | Type of account: | Institution name: | | |
| | Yes. List each account | | mondiane. | | |
| | separately. | 401(k) or similar plan: | | | |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | Examples: Agreements vompanies, or others No | prepayments I deposits you have made so that with landlords, prepaid rent, publi | | | |
| | Yes | Electric: | | | - |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | · |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or for | a number of years) | |
| | ✓ No ☐ Yes | Issuer name and description: | | | |
| | | - | | | |
| | | | | | |
| | | | | | |

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| Debt | tor 1 Khatilu First Name | M Middle Name | Ushodi Last Name | Case number (if known) | |
|------|-----------------------------|---|---|---|---|
| 24. | Interests in a | | | der a qualified state tuition program. | |
| | ✓ No | | Separately file the records of any intere | porto 11 II S.C. & E21/o): | |
| | Yes | institution name and description. | Separately life the records of any interes | esis.11 0.3.0. § 321(b). | |
| | | | | | |
| 25. | Trusts, equita | able or future interests in proper | ty (other than anything listed in lin | ne 1), and rights or powers | |
| | exercisable f | or your benefit | | | |
| | Yes. Desc | ribe | | | |
| 26. | Patents con | vrights trademarks trade secre | ts, and other intellectual property | | |
| 20. | Examples: Inte | | ceeds from royalties and licensing agr | | |
| | ✓ No Yes. Desc | ribe | | | |
| 0.7 | | | | | |
| 27. | • | nchises, and other general intan ilding permits, exclusive licenses, co | operative association holdings, liquo | r licenses, professional licenses | |
| | ✓ No Yes. Desc | ribe | | | |
| | | | | | |
| Moi | ney or proper | ty owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds ov | wed to you | | | |
| | | specific information | | Federal: | \$0.00 |
| | you a | t them, including whether already filed the returns the tax years | | State: | \$0.00 |
| 29. | Family suppor | | | Local: | \$0.00 |
| | Examples: Past | | al support, child support, maintenance | e, divorce settlement, property settlemen | t |
| | ✓ No Yes. Give s | specific information | | Alimony: | \$0.00 |
| | | | | Maintenance: | \$0.00 |
| | | | | Support: | \$0.00 |
| | | | | Divorce settlement: | \$0.00 |
| 30. | Other amount | s someone owes you | | Property settlement: | \$0.00 |
| | | aid wages, disability insurance payr ial Security benefits; unpaid loans y | ments, disability benefits, sick pay, va ou made to someone else | cation pay, workers' compensation, | |
| | ✓ No | | | | |
| | Yes. Descr | ihe | | | |

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| Deb ¹ | tor 1 Khafilu | M | Oshodi | Case number (if known) | |
|------------------|---|--|--------------------------------|--|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance p Examples: Health, disabilit | | rings account (HSA); credit, I | nomeowner's, or renter's insurance | |
| | Yes. Name the insura of each policy and list | nce company | pany name: | Beneficiary: | Surrender or refund value: |
| 32. | | | | cy, or are currently entitled to receive | |
| | Yes. Describe | | | | |
| 33. | | rties, whether or not you ha oloyment disputes, insurance | | a demand for payment | |
| 34. | Other contingent and unto set off claims | nliquidated claims of every | nature, including counter | claims of the debtor and rights | |
| | No Yes. Describe | | | | |
| 35. | Any financial assets you | did not already list | | | |
| | Yes. Describe | | | | |
| 36. | | all of your entries from Part | | or pages you have attached | \$1500.00 |
| Part | 5: Describe Any Bus | siness-Related Property | You Own or Have an I | nterest In. List any real estate in Part | 1. |
| 37. | Do you own or have any | legal or equitable interest | in any business-related p | operty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | | po Do | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or | commissions you already e | arned | | |
| | ✓ No Yes. Describe | | | | |
| 39. | Office equipment, furnis Examples: Business-relate | | ems, printers, copiers, fax m | achines, rugs, telephones, desks, chairs, electr | onic devices |
| | ✓ No Yes. Describe | | | | |
| | | | | | |

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| Debt | tor 1 Khafilu | М | Oshodi | Case number (if known) | |
|--------|--------------------------------------|-------------------------------------|--------------------------------------|--------------------------------|------------------------------|
| | First Name | Middle Name | Last Name | | |
| 40. | Machinery, fixtures, | equipment, supplies you u | se in business, and tools of you | r trade | |
| | No | | | | |
| | Yes. Describe | Clipper Set, Blow dryer, fac | ce massager, other misc barber sup | oplies | |
| | | | | • | |
| | \$600.00 | | | | |
| 41. | Inventory | | | | |
| | _ | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 42. | Interests in partners | hips or joint ventures | | | |
| | ✓ No | | | | |
| | | | Name of entity: | % of ownership: | |
| | Yes. Give specific information about | | | | |
| | them | | | <u> </u> | - |
| | | | | | |
| | | | | | |
| 43 (| Customer lists, mailin | g lists, or other compilation | ons | | - |
| 10. | _ | g note, or other complication | 3.10 | | |
| | ✓ No | | | | |
| | Yes. Do your lists | include personally identifiab | le information (as defined in 11 U.S | S.C. § 101(41A))? | |
| | ☐ No | | | | |
| | <u></u> | cribe | | | |
| | | 0.1.2 0.111111 | | | |
| 44. | Any business-related | d property you did not alre | ady list | | |
| | ✓ No | | | | |
| | <u> </u> | | | | <u> </u> |
| | Yes. Give specific information | | | | |
| | | • | | | |
| | | • | | | |
| | | | | | |
| | | | | | |
| | | • | | | |
| | | | | | |
| | | | | | |
| | | - | ert 5, including any entries for pa | ages you have attached | |
| for Pa | art 5. Write that numb | er here | | | \$600.00 |
| Part | 6. Describe Anv F | arm- and Commercia | I Fishing-Related Property | ou Own or Have an Interest In. | |
| rait | | in interest in farmland, list it in | | | |
| 46. | Do you own or have | any legal or equitable inte | erest in any farm- or commercia | I fishing-related property? | |
| | • | | | 5 | Current value of the |
| | No. Go to Part 7. | | | | portion you own? |
| | Yes. Go to line 47 | 7. | | | Do not deduct secured claims |
| 47 | Form onimals | | | | or exemptions |
| 47. | Farm animals Examples: Livestock, | poultry, farm-raised fish | | | |
| | | | | | |
| | No No | | | | |
| | Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Khatilu First Name | M Middle Name | Ushodi Last Name | Case number (if known) | |
|--------------|--------------------------------|---|---------------------------|------------------------------|---|
| 40 | | | Last Name | | |
| 48. | Crops-either growing of | or narvested | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 49 | Farm and fishing equir | oment, implements, machinery, fi | xtures and tools of trad | e | |
| 10. | | , | aturos, una toolo oi traa | • | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 50. | Farm and fishing suppl | lies, chemicals, and feed | | | |
| | .✓ No | | | | |
| | Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | | |
| 51. | Any farm- and commer | rcial fishing-related property you | did not already list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | , | |
| 52. A | dd the dollar value of al | l of your entries from Part 6, incli | uding any entries for pag | ges you have attached | 1 |
| for P | art 6. Write that number | here | | | |
| | | | | ' | |
| | | | | | |
| | D 11 . AU D | | | INC. I STALL | |
| Part | | perty You Own or Have an In | | d Not List Above | |
| 53. | | perty of any kind you did not alrea s, country club membership | idy list? | | |
| | | s, seamly stab membership | | | |
| | No No | | | | |
| | Yes. Give specific information | | | | |
| | | | | | |
| | | | | | - |
| | | | | | _ |
| 54. A | dd the dollar value of al | I of your entries from Part 7. Writ | e that number here | | |
| | | | | | - |
| | | | | | |
| | | | | | |
| | | | | | |
| Part | 8: List the Totals of | Each Part of this Form | | | |
| | | | | | |
| 55. | Part 1: Total real estate | , line 2 | | | |
| F.C. | nort O total vahialaa lin | - F | | | |
| | part 2 total vehicles, lin | e 5 id household items, line 15 | | | |
| | | | \$1450.00 | <u></u> | |
| 58. F | Part 4: Total financial as | sets, line 36 | \$1500.00 | | |
| 59. | Part 5: Total business-re | elated property, line 45 | \$600.00 | | |
| 60 | Part 6: Total farm- and f | ishing-related property, line 52 | φοσο.σσ | | |
| | | | | <u></u> | |
| 61. | Part 7: Total other prope | erty not listed, line 54 | | <u></u> | |
| 62. | Total personal property. | Add lines 56 through 61 | *3550.00 | | + \$3550.00 |
| | | | φοσσοσο | Copy personal property total | Ψ Ψ σ σ σ σ σ σ σ σ σ σ σ σ σ σ σ σ σ σ |
| | | | | | ¢2550.00 |
| 63 7 | otal of all property on S | chedule A/B. Add line 55 + line 62. | | | \$3550.00 |
| 33.1 | J proporty on o | | | | |

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| Fill in this information to identify your case: | | | | | | | |
|---|------------|-------------|------------------------------|--|--|--|--|
| Debtor 1 | Khafilu | М | Oshodi | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: Case number (ff known) | | Northern | District of Illinois (State) | | | | |
| | | | (2-11-17) | | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | t 1: Identify the Property You Clain | n as Exempt | | |
|----|---|-------------------------------------|---|------------------------------------|
| 1. | Which set of exemptions are you claimi | ng? Check one only, ev | ren if your spouse is filing with you. | |
| | You are claiming state and federal r | nonbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | |
| | You are claiming federal exemption | s. 11 U.S.C. § 522(b)(| 2) | |
| 2. | For any property you list on Schedule A. | /R that you claim as e | vemnt fill in the information below | |
| ۷. | To any property you list on ochedule A | D that you claim as e | xempt, iii iii the information below. | |
| | Brief description of the property and | Current value of | Amount of the exemption you claim | Specific laws that allow exemption |
| | line on Schedule A/B that lists this property | the portion you own | Check only one box for each exemption. | |
| | | Copy the value from Schedule A/B | | |
| | Brief | | | 735 ILCS 5/12-1001(b) |
| | description: | \$750.00 | \$750.00 | |
| | Used Furniture | | 100% of fair market value, up to any | - |
| | Line from Schedule A/B: 06 | | applicable statutory limit | |
| | Brief | | | 735 ILCS 5/12-1001(a) |
| | description: | \$250.00 | \$250.00 | |
| | Used Clothing | | 100% of fair market value, up to any | - |
| | Line from Schedule A/B: 11 | | applicable statutory limit | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? | |

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Debtor 1 Khafilu M Oshodi Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$450.00 description: **✓** \$450.00 x4 televisions; x1 laptop 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$1,500.00 description: **✓** \$1,500.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 Brief 735 ILCS 5/12-1001(b) \$0.00 description: **✓** Checking account, 100% of fair market value, up to any Citibank applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(d) \$600.00 description: **✓** \$600.00 Clipper Set, Blow dryer, 100% of fair market value, up to any face massager, other misc barber supplies applicable statutory limit

Line from Schedule A/B:

40

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| | | | · · | | | |
|------------------------|-------------------------------|-------------------------------|---|--|------------------------------|------------------------------------|
| Fill in this info | rmation to identify your ca | ase: | | | | |
| Debtor 1 | Khafilu | М | Oshodi | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States I | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| _ | | | (State) | | | |
| Case number (If known) | - | | | | | |
| Official | Form 106D | | | <u> </u> | | Check if this is an amended filing |
| Schedu | ule D: Credit | ors Who Hav | ve Claims Secure | ed by Prop | erty | 12/15 |
| more space is | - | | e are filing together, both are equals ber the entries, and attach it to t | • | | |
| 1. Do any | creditors have claims s | ecured by your propert | y? | | | |
| ✓ No. | Check this box and subn | nit this form to the court v | vith your other schedules. You hav | e nothing else to repo | rt on this form. | |
| Yes. | Fill in all of the informatio | n below. | | | | |
| Part 1: List | All Secured Claims | | | | | |
| for each of | | ditor has a particular claim, | ed claim, list the creditor separately list the other creditors in Part 2. As | Column A Amount of claim Do not deduct the | Column B Value of collateral | Column C Unsecured portion |

this claim

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| Fill ir | n this inforr | mation to identify your c | ase: | | | |
|---|--|--|---|---|--|--|
| Debt | tor 1 | Khafilu | М | Oshodi | | |
| | | First Name | Middle Name | Last Name | | |
| Debt | | | | | | |
| (Spot | use, if filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States B | ankruptcy Court for the: | Northern | District of Illinois | | |
| | | | | (State) | | |
| (If kno | e number | | | | | |
| ` | | 0 KIDS 106F/F | | | | Check if this is an amended filing |
| OΠ | iciai F | orm 106E/F | | | | |
| Sc | hedu | ıle E/F: Cre | ditors Who | Have Unse | cured Claims | 12/15 |
| other Form claim the e know | party to a 106A/B) a is that are ntries in th | any executory contracts and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At | s or unexpired leases that cutory Contracts and Un Creditors Who Hold Claim | t could result in a claim. expired Leases (Official I s Secured by Property. If | Also list executory contracts of form 106G). Do not include an more space is needed, copy to | NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured he Part you need, fill it out, number rite your name and case number (if |
| | | | | | | |
| 1. | | | secured claims against | you? | | |
| | ✓ No. G | Go to Part 2. | | | | |
| | Yes. | | | | | |
| 2. | listed, iden As much a | ntify what type of claim it as possible, list the claims | is. If a claim has both prior | ity and nonpriority amounts ding to the creditor's name | s, list that claim here and show be. If you have more than two prio | rately for each claim. For each claim oth priority and nonpriority amounts. rity unsecured claims, fill out the |

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

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| Debto | r 1 Khafilu First Name | M Middle Name | Oshodi Last Name | Case number (if known) | |
|--------|---|--|---------------------|--|----------------------|
| Part 2 | List All of Your NONPRIO | RITY Unsecured CI | aims | | |
| 4. Li | Yes. st all of your nonpriority unsecu | rt in this part. Submit the | nis form to the co | ourt with your other schedules. The creditor who holds each claim. If a creditor has much, identify what type of claim it is. Do not list claims already | |
| lf | · | - | | 3.If you have more than four priority unsecured claims fill | out the Continuation |
| | | | | | Total claim |
| 4.1 | CERTIFIED SERVICES INC Nonpriority Creditor's Name 1733 WASHINGTON ST STE 2 | | | en was the debt incurred? 04/2011 | \$3,752.00 |
| | WAUKEGAN Illinois City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim relates to Is the claim subject to offset? Yes | Zip Code one. d another | | of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed De of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA | ar |
| 4.2 | CERTIFIED SERVICES INC | | Las | st 4 digits of account number 803A | \$1,464.00 |
| | Nonpriority Creditor's Name 1733 WASHINGTON ST STE 2 Number Street WAUKEGAN Illinois City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and Check if this claim relates to Is the claim subject to offset? No Yes | Zip Code one. d another to a community debt | As | of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Or of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other simila debts 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA | |
| 4.3 | City of Chicago - Parking and red Nonpriority Creditor's Name Department of Revenue - PO Box Number Street Chicago Illinois City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim relates to Is the claim subject to offset? No Yes | 60680 Zip Code | Wh As | en was the debt incurred? of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Parking Tickets | |

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Debtor 1 Khafilu Oshodi M Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ComEd \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Utility Is the claim subject to offset? **✓** No Yes **COMNWLTH FIN** \$102.00 26N1 Last 4 digits of account number ___ Nonpriority Creditor's Name When was the debt incurred? 12/2011 960 N MAIN STREET Number As of the date you file, the claim is: Check all that apply. Contingent SCRANTON 18508 Pennsylvania Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes **CREDITORS DISCOUNT & A** 4.6 \$723.00 Last 4 digits of account number 0185 Nonpriority Creditor's Name 415 E MAIN ST When was the debt incurred? 03/2012 Number As of the date you file, the claim is: Check all that apply. Contingent STREATOR 61364 Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

✓ No

Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

V

Other. Specify

001 Collection; Collecting for

ORIGINAL CREDITOR: MEDICAL

PAYMENT DATA

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Debtor 1 Khafilu M Oshodi Case number (if known)
First Name Middle Name Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | n Page | |
|--------|--|---|-------------|
| | After listing any entries on this page, number them beginning wi | th 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | CREDITORS DISCOUNT & A | - Last 4 digits of account number 0640 | \$528.00 |
| | Nonpriority Creditor's Name 415 E MAIN ST | When was the debt incurred? 05/2011 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | STREATOR Illinois 61364 | - Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL | |
| | ✓ No | Other. Specify PAYMENT DATA | |
| | Yes | | |
| 4.8 | IL Secretary of State | - Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name 2701 S. Dirksen Parkway | When was the debt incurred? n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | - Contingent | |
| | Springfield Illinois 62723 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Other. Specify Notice - License Suspension | |
| | No | | |
| | Yes | | |
| 4.9 | Lake View Towers Residents | Lock 4 digits of account number | \$1,100.00 |
| | Nonpriority Creditor's Name 4550 N Clarendon Ave | - Last 4 digits of account number When was the debt incurred? n/a | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent Unliquidated | |
| | ChicagoIllinois60640CityStateZip Code | Disputed | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 only | Student loans | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify Eviction | |
| | Is the claim subject to offset? | _ | |
| | ✓ No | | |
| | Yes | | |

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Oshodi Debtor 1 Khafilu M Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 MERCHANTS CR \$176.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W JACKSON ST SUITE 900 When was the debt incurred? 04/2014 Number As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** Illinois 60606 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes 4.11 MERCHANTS CREDIT GUIDE \$1,173.00 Last 4 digits of account number 0305 Nonpriority Creditor's Name 223 W JACKSON BLVD STE 4 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent CHICAGO Illinois 60606 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes NORTHWEST COLLECTORS 4.12 \$897.00 Last 4 digits of account number _ Nonpriority Creditor's Name 3601 ALGONQUIN RD STE 23 When was the debt incurred? 12/2015 Number As of the date you file, the claim is: Check all that apply. Contingent **ROLLING** 60008 Illinois Unliquidated **MEADOWS** City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 Collection; Collecting for

✓ No Yes

Is the claim subject to offset?

Other. Specify ___

ORIGINAL CREDITOR: MEDICAL

PAYMENT DATA

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Oshodi Debtor 1 Khafilu M Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 NW COLLECTOR \$878.00 Last 4 digits of account number Nonpriority Creditor's Name 3601 ALGONQUIN RD SUITE 232 When was the debt incurred? 12/2010 Number As of the date you file, the claim is: Check all that apply. Contingent 60008 **ROLLING** Illinois Unliquidated **MEADOW** City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL Is the claim subject to offset? **✓** No Yes 4.14 NW COLLECTOR \$103.00 Last 4 digits of account number 6448 Nonpriority Creditor's Name 3601 ALGONQUIN RD SUITE 232 When was the debt incurred? 12/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ROLLING** 60008 Illinois Unliquidated **MEADOW** State City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL Is the claim subject to offset? **✓** No Yes People's Gas \$600.00 Last 4 digits of account number Nonpriority Creditor's Name 130 E. Randolph Drive When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60601 Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Utility Other. Specify _

✓ No Yes

Is the claim subject to offset?

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Debtor 1 Khafilu Oshodi M Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 **TMobile** \$500.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 742596 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Ohio 45274 Cincinnati City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Utility Is the claim subject to offset? **✓** No Yes TTL FIN AC 4.17 \$11,869.00 Last 4 digits of account number __ 2301 Nonpriority Creditor's Name 05/2015 When was the debt incurred? 4530 S Archer Ave Number As of the date you file, the claim is: Check all that apply. Contingent 60632 Chicago Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify ___ 58 Automobile Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Khafilu M Oshodi Case number (if known)
First Name Middle Name Last Name

| THISTING | ividue varie | | |
|-----------------------------|---|-------|-------------------------------|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for s | tatistical reporting purposes |
| | | | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 |
| | amount here. 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | oe. Total. Add lilles oa tillough od. | oe. | |
| | | | Total claims |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write | 6i. | \$36,265.00 |
| | that amount here. | • | |
| | 6j. Total. Add lines 6f through 6i. | 6i. | \$36,265.00 |

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| Fill in this infor | rmation to identify your ca | ase: | | |
|---|-----------------------------|-------------|----------------------|--|
| Debtor 1 | Khafilu | M | Oshodi | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | |
| Case number | | | (State) | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| E:0 : - 0 : - : - C | and the state of t | | | _ | |
|---------------------------------|--|-------------------------------|------------------------------|------------------|--|
| FIII IN THIS INT | ormation to identify your ca | ase: | | | |
| Debtor 1 | Khafilu | М | Oshodi | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| | | | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case numbe (If known) | r | | (Giaic) | | |
| | | | | | Check if this is ar |
| | | | | | amended filing |
| Official | I Form 106H | | | | |
| Schedu | le H: Your Cod | ebtors | | | 12/15 |
| 1. Do you l | wer every question. have any codebtors? (If you | u are filing a joint case, do | not list either spouse | as a codebtor.) | ditional Pages, write your name and case number (if |
| | ouisiana, Nevada, New Mex | ico, Puerto Rico, Texas, W | ashington, and Wisco | nsin.) | |
| | o. Go to line 3. | | | | |
| ☐ Ye | s. Did your spouse, forme | r spouse, or legal equiva | lent live with you at th | ne time? | |
| ✓ | No | | | | |
| | Yes. In which community | state or territory did you | u live? | Fill in the | e name and current address of that person. |
| | Name of your spouse, for | ormer spouse, or legal equ | ivalent | | |
| | Number Street | | | | |
| | City | State | Zip | Code | |
| 3. In Colur | nn 1, list all of your codeb | tors. Do not include you | r spouse as a codebt | or if your spous | se is filing with you. List the person shown in line 2 |

again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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| Fill in the | nis information to identify | your case: | | | | | |
|----------------------|---|---|-----------------|---------------|---------------|---|------------------------|
| Debtor | | М | Oshoo | | | | |
| | First Name | Middle Name | Last N | lame | | Check if this is: | |
| Debtor 2 (Spouse, | 2 if filing) First Name | Middle Name | Last N | lame | | An amended filing | |
| | States Bankruptcy Court for | Northern | District of III | | | A supplement showing po | st-petition chapter 13 |
| the: | states bankruptcy Court for | Northern | | State) | | expenses as of the followi | ng date: |
| Case nu | | | | | | MM / DD / YYYY | |
| , , | | | | | | IVIIVI / DD / TTTT | |
| Offic | ial Form 106l | | | | | | |
| Sche | edule I: Your In | come | | | | | 12/15 |
| | | | | | | r 1 and Debtor 2), both are | |
| spouse. | If more space is needed (if known). Answer ever | l, attach a separate she y question. | | | | do not include informatio Iditional pages, write you | - |
| 1. Fill | in your employment | | Debtor 1 | 1 | | Debtor 2 | |
| info | rmation. | Employment status | | | | | |
| - | ou have more than one job, ch a separate page with | Employment status | ✓ Emplo | oyea mploy | ed | Employed Not Employed | |
| info | rmation about additional | | | | | INOT Employed | |
| emp | oloyers. | Occupation | Self-emplo | oymen | t | | |
| | ude part time, seasonal, or -employed work. | Employer's name | | | | | |
| Occ | supation may include student | Employer's address | | | | | |
| | omemaker, if it applies. | | Number St | reet | | Number Street | |
| | | | | | | | |
| | | | - | | | | |
| | | | City | | State Zip Cod | e City St | ate Zip Code |
| | | | Oity | | State Zip Ood | o Oity Oi | ate Zip Gode |
| | | How long employed there? | | | | | |
| | | | | | | | |
| Part 2 | Give Details About N | Monthly Income | | | | | |
| spouse If you o | e unless you are separated. | e more than one employer, | | | | ne, write \$0 in the space. Inclures | |
| | • | | | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| | st monthly gross wages, sala eductions.) If not paid monthly e. | • . | | 2. | \$0.0 | | |
| 3. E s | stimate and list monthly over | rtime pay. | | 3. | + \$0.0 | 00 | _ |
| 4. C a | alculate gross income. Add li | ine 2 + line 3. | | 4. | \$0.0 | 00 | |

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| Debi | tor 1Khafilu First Name | | Jshodi .ast Name | | Case number known) | | |
|----------------------|---|---|---------------------|--------|------------------------|-----------------------------------|-------------------------|
| | | out Hallo | | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Co | py line 4 here | | → 4 | . " | \$0.00 | | |
| 5. Lis | st all payroll dedu | | | | | | |
| 58 | a. Tax, Medicare, a | and Social Security deductions | 5 | a. | \$0.00 | | |
| 5k | o. Mandatory cont | ributions for retirement plans | 5 | b. | \$0.00 | | |
| 50 | c. Voluntary contri | butions for retirement plans | 5 | C. | \$0.00 | | |
| 50 | d. Required repayr | nents of retirement fund loans | 5 | d. | \$0.00 | | |
| 5€ | e. Insurance | | 5 | e. | \$0.00 | | |
| 5f | . Domestic suppor | rt obligations | 51 | f. | \$0.00 | | |
| 50 | g. Union dues | | 5 | g. | \$0.00 | | |
| 5h | n. Other deduction | ns. Specify: | _ 5 | h. + | \$0.00 + | | |
| 6. Ad +5h. | ld the payroll dedu | uctions. Add lines 5a + 5b + 5c + 5d + 5e +5f | + 5g 6 | | \$0.00 | | |
| 7. Ca | lculate total mon | thly take-home pay. Subtract line 6 from line | 4. 7 | - | \$0.00 | | |
| 8. Lis | st all other income | e regularly received: | | | | | |
| 88 | business, profes | , | | | | | |
| | gross receipts, or | It for each property and business showing dinary and necessary business expenses, and | | | #000.00 | | |
| 01 | the total monthly | | 8: | | \$990.00 | - | |
| | o. Interest and div | | | b. | \$0.00 | - | |
| 80 | dependent regu | - | a | | | | |
| | | spousal support, child support, maintenance, t, and property settlement. | 8 | C. | \$0.00 | | |
| 80 | d. Unemployment | compensation | 8 | d. | \$0.00 | | |
| 86 | e. Social Security | | 8 | e. | \$0.00 | | |
| 8f | Include cash assis cash assistance the under the Suppler housing subsidies Specify: | nt assistance that you regularly receive stance and the value (if known) of any non-nat you receive, such as food stamps (benefits mental Nutrition Assistance Program) or s Programs Income | 8: | f | \$198.00 | | |
| 80 | g. Pension or retir | | | g. | \$0.00 | | |
| ` | n. Other monthly i | | | h. + | \$0.00 + | | |
| | - | e Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + | - 8h. 9 | | \$1,188.00 | | |
| | | ncome. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing sp | 10 oouse | 0. | \$1,188.00 + | = | \$1,188.00 |
| In fri | clude contributions ends or relatives. | ular contributions to the expenses that you from an unmarried partner, members of your mounts already included in lines 2-10 or amou | household, | your o | lependents, your roomn | | |
| Sp | pecify: | | | | | 11 | 1. + \$0.00 |
| | | the last column of line 10 to the amount in the Summary of Schedules and Statistical Sur | | | | | 2. \$1,188.00 |
| | | | | | | | Combined monthly income |
| 13. D | o you expect an i | ncrease or decrease within the year after y | ou file this | form | • | | |
| | No. | | | | | | |
| Г | Yes. Explain: | | | | | | |
| _ | _ | | | | | | |

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| Debtor 1Khafilu | M | Osho | odi | | Case number (if | |
|---------------------------------------|-----------------------|----------------|--------------|--------------|-----------------|--|
| First Name | Middle Name | Last I | Name | | known) | |
| Official Form 106I. Addi | tional page. | | | | | |
| 8a.Net income from rental proper | ty and from operating | a business, pr | ofession, or | farm | | |
| 8a.1 Self Employed Barber Incom | me | Debtor 1 | Debtor 2 | | | |
| Gross receipts (before all deducti | ons) | \$1,650.00 | | | | |
| Ordinary and necessary operating | g expenses | -\$660.00 | | | | |
| Net monthly income from a busing farm | ness, profession, or | \$990.00 | | Copy here | \$990.00 | |

Official Form 106l Schedule I: Your Income page 3

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| | | Docu | ument Page 36 of 74 | | |
|---------------------------|------------------------------------|---|---|--------------------|--|
| Fill in this infor | rmation to identi | fy your case: | | | |
| Debtor 1 | Khafilu First Name | M Middle Name | Oshodi Last Name | | |
| Debtor 2 | riiotrianio | Middle Hairle | Luot Humo | Check if this is: | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended fill | ng |
| United States I | Bankruptcy Court | for the: Northern | District of Illinois (State) | | showing post-petition chapter 13 the following date: |
| Case number (If known) | | | | MM / DD / YYY | Y |
| Official | Form 10 |)6J | | | |
| Schedul | e J: Your | Expenses | | | 12/1 |
| information. If | | as possible. If two married people a needed, attach another sheet to this tion. | | | |
| | cribe Your Ho | | | | |
| 1. Is this a join | int case? | | | | |
| ✓ No. G | o to line 2 | | | | |
| Yes. D | oes Debtor 2 liv | re in a separate household? | | | |
| ١ | No | · | | | |
| L | | ? must file Official Forms 106J-2, <i>Expe</i> l | nage for Congrete Household of Dobt | or 2 | |
| 2 Do you hay | ve dependents? | No | ises for deparate flouserfold of Debt | ,, z. | |
| - | Debtor 1 and | 브 | B d H L.P L.P L. | B d II. | Barriel and the state of |
| Debtor 2. | Deptor Failu | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | | | Child | 8 years | No. |
| | | | | | ✓ Yes. |
| | | | Child | 7 years | No. |
| | | | | | ✓ Yes. |
| | penses include of people other | ✓ No | | | |
| yourself an dependent | | Yes | | | |
| Part 2: Esti | mate Your On | ngoing Monthly Expenses | | | |
| - | of a date after t | f your bankruptcy filing date unless y he bankruptcy is filed. If this is a sup | | · · | |
| | • | th non-cash government assistance cluded it on <i>Schedule I: Your Incom</i> e | - | | Your expenses |
| | I or home owne or the ground or | rship expenses for your residence. In lot. 4. | nclude first mortgage payments and | | \$130.00 |
| If not inc | luded in line 4: | | | | |

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Khafilu M Oshodi Case number (if known)

| | | Your expenses |
|--|-----|---------------|
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$0.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$60.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 7. | \$383.00 |
| 8. Childcare and children's education costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$100.00 |
| 10. Personal care products and services | 10. | \$100.00 |
| 11. Medical and dental expenses | 11. | \$0.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | 12. | \$240.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and religious donations | 14. | \$0.00 |
| 15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a | \$0.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$0.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16 | \$0.00 |
| 17. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19.Other payments you make to support others who do not live with you. Specify: | 10 | #0.00 |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 19. | \$0.00 |
| 20a. Mortgages on other property | 20a | \$0.00 |
| 20b. Real estate taxes. | 20b | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | 20d | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20e | \$0.00 |

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| Debtor 1 Khafi | | М | Oshodi | Case number (if known) | | |
|-----------------------|------------------------------|------------------------|---|------------------------|-----|------------|
| First N | | Middle Name | Last Name | | | |
| 21. Other. Spe | cify: | | | | 21 | \$0.00 |
| 00 0-1-1-1- | | | | | | |
| | your monthly expenses. | | | | | \$1,013.00 |
| | nes 4 through 21. | | | | | \$0.00 |
| , , | ` , , | ,, | from Official Form 106J-2 | | | \$1,013.00 |
| 22c. Add lir | ne 22a and 22b. The resul | It is your monthly exp | enses. | | 22. | |
| 23. Calculate | your monthly net income | e. | | | | |
| 23a. Copy | line 12 (your combined m | onthly income) from | Schedule I. | | 23a | \$1,188.00 |
| 23b. Copy | your monthly expenses fro | om line 22 above. | | | 23b | \$1,013.00 |
| | act your monthly expenses | | ncome. | | | \$175.00 |
| The re | esult is your monthly net in | ncome. | | | 23c | |
| | | | oan within the year or do y modification to the terms of | | | |

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| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Khafilu | М | Oshodi | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number | | | (Otato) | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Khafilu Oshodi | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 3/13/2017 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| ": in thin inf | avanation to identif | | | | | | | | |
|--------------------------|---|-------------|--------------------|-----------------------|--------------------------|-------------------------------|-----------------------------------|----------------|---|
| | ormation to identify | your case | | | | | | | |
| Debtor 1 | Khafilu First Name | | M Middle Na | ame | Oshodi Last Nam | e | | | |
| Debtor 2 | | | | | | | | | |
| Spouse, if filing |) First Name | | Middle Na | ame | Last Nam | е | | | |
| Inited States | Bankruptcy Court | or the: N | lorthern | | District of Illino (Stat | | | | |
| Case numbe fknown) | er | | | | (Stati | o) | | | |
| Officia | Form 10 | 7 | | | | | | | Check if this is amended filing |
| tatem | ent of Fina | _ ncial | Affairs fo | or Inc | dividuals | Filing fo | r Bankrı | uptcy | 12 |
| | | | | | | | | | or supplying correct |
| | . If more space is known). Answer e | | | rate sne | eet to this form | . On the top o | or any addition | onai pages, wr | ite your name and case |
| Ci- | us Dataile Abaut | Varm NA | auital Otatura a | \ \ \ / / l . | awa Van Linad | Dafawa | | | |
| Part 1: Gi | ve Details About | Your Ma | aritai Status a | ina wn | ere You Livea | before | | | |
| . What | is your current ma | rital statu | s? | | | | | | |
| \square N | 1arried | | | | | | | | |
| | | | | | | | | | |
| N 🖺 | ot married | | | | | | | | |
| | | | | | | | | | |
| | ot married | nave you l | ived anywhere | other th | nan where you liv | ve now? | | | |
| 2. During | g the last 3 years, | - | · | | - | | | | |
| 2. During | g the last 3 years, l | - | · | | - | | now. | | |
| 2. During | g the last 3 years, loo loo les. List all of the pl | - | · | 3 years. | Do not include v | where you live | now. | | |
| 2. During | g the last 3 years, | - | · | 3 years. | - | | now. | | Dates Debtor 2 lived there |
| 2. During | g the last 3 years, loo loo les. List all of the pl | - | · | 3 years. Dates | Do not include v | where you live | | | there |
| 2. During | g the last 3 years, loo loo les. List all of the pl | - | · | 3 years. Dates | Do not include v | where you live | now. s Debtor 1 | | |
| 2. During N Y D | g the last 3 years, looses. List all of the placebtor 1: | - | · | 3 years. Dates I | Do not include v | Debtor 2: | s Debtor 1 | | Same as Debtor 1 |
| 2. During N Y D | g the last 3 years, looses. List all of the placebtor 1: | - | · | 3 years. Dates there | Do not include v | where you live | s Debtor 1 | | Same as Debtor 1 From |
| 2. During N Y D | g the last 3 years, lo es. List all of the ple ebtor 1: 1 N Lavergne lumber Street | aces you l | ived in the last 3 | 3 years. Dates there | Do not include v | Debtor 2: | s Debtor 1 | | Same as Debtor 1 |
| 2. During N Y D | g the last 3 years, loo es. List all of the placeboor 1: 1 N Lavergne cumber Street | aces you l | ived in the last 3 | 3 years. Dates there | Do not include v | Debtor 2: Same a | s Debtor 1 eet | Zip Code | Same as Debtor 1 From |
| 2. During N Y D | g the last 3 years, lo es. List all of the ple ebtor 1: 1 N Lavergne lumber Street | aces you l | ived in the last 3 | 3 years. Dates there | Do not include v | Debtor 2: Same a Number Str | s Debtor 1 | Zip Code | Same as Debtor 1 From |
| 2. During N Y D | g the last 3 years, loo es. List all of the placeboor 1: 1 N Lavergne cumber Street | aces you l | ived in the last 3 | 3 years. Dates there | Do not include v | Debtor 2: Same a Number Str | s Debtor 1 eet State | Zip Code | there Same as Debtor 1 From To |
| 2. During N Y D | g the last 3 years, loo es. List all of the placeboor 1: 1 N Lavergne cumber Street | aces you l | ived in the last 3 | 3 years. Dates there | Do not include v | Debtor 2: Same a Number Str | s Debtor 1 eet State s Debtor 1 | Zip Code | there Same as Debtor 1 From To |
| 2. During N Y D | g the last 3 years, loo es. List all of the placebook of | aces you l | ived in the last 3 | Dates there | Do not include v | Debtor 2: Same a Number Str | s Debtor 1 eet State s Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| 2. During N Y D | g the last 3 years, loo es. List all of the placebook of | aces you l | ived in the last 3 | Dates there From To | Do not include v | Debtor 2: Same a Number Str | s Debtor 1 eet State s Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From |

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Case number (if known)

Oshodi

М

First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$2570.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$14000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$13270.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Debtor 1 Khafilu

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Debtor 1 Khafilu Oshodi М Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors
Other

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| tor 1 | Khafilu | | М | Os | hodi | Case number | (if known) |
|--------------------|---|--|---|---|---|--|---|
| | First Name | | Middle Name | Las | t Name | | |
| Insi con age | ders include your porations of which | relatives; a you are a for a busin | ny general partner n officer, director, ess you operate a | s; relatives of any person in control, | general partners; par or owner of 20% or | tnerships of which y r more of their voting | who was an insider? you are a general partner; g securities; and any managing odomestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to a | an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| - | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | hin 1 year before der? | you filed | for bankruptcy, | did you make an | y payments or tran | sfer any property o | n account of a debt that benefited an |
| Incl | ude payments on | debts gua | ranteed or cosigne | ed by an insider. | | | |
| | No Vee List all nav | mente tha | t benefited an ins | ider | | | |
| Ш | 103. List all payi | nono una | t benefited art inc | Dates of | Total amount | Amount you | Reason for this payment |
| | | | | payment | paid | still owe | Include creditor's name |
| | | | | | | | mode of cancer of manne |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

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Debtor 1 Khafilu Oshodi Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished.

City

State

Zip Code

Property was attached, seized, or levied.

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| Debt | tor 1 Khafilu First Name | M Middle Name | Oshodi Last Name | Case number (if known) | |
|------|-----------------------------|---|-------------------------------|---|-----------------------|
| | riist ivanie | Middle Name | Last Name | | |
| 11. | | you filed for bankruptcy, did make a payment because yo | | oank or financial institution, set off any am | ounts from your |
| | ✓ No ✓ Yes. Fill in the det | ails. | | | |
| | 100.1 111 111 110 000 | ano. | Describe the action th | e creditor took Date action | Amount |
| | | | bescribe the action th | was taken | Amount |
| | Creditor's Name | | | | |
| | Number Street | | | | |
| | - | | Last 4 digits of account | number: XXXX- | |
| | City | State Zip Code | | | |
| 12. | | ou filed for bankruptcy, was custodian, or another officia | | possession of an assignee for the benefit o | f creditors, a court- |
| | □ Na | custodian, or another officia | | | |
| | ✓ No Yes | | | | |
| Part | 5: List Certain Gifts | s and Contributions | | | |
| | | | d you give ony gifts with a t | otal value of more than \$600 per person? | |
| 13. | - N | you med for bankruptcy, did | a you give any gints with a t | otal value of more than \$000 per person: | |
| | ✓ No ✓ Yes. Fill in the de | tails for each gift. | | | |
| | _ | value of more than \$600 | Describe the gifts | Dates you gave the gifts | Value |
| | | | | | |
| | Person to Whom Y | ou Gave the Gift | - | | |
| | N | | _ | | |
| | Number Street | | _ | | |
| | City | State Zip Code | | | |
| | Person's relationsh | —————————————————————————————————————— | | | |
| | Person to Whom Y | ou Gave the Gift | - | | _ |
| | - | | - | | |
| | Number Street | | - | | |
| | City | State Zip Code | - | | |
| | Person's relationsh | ip to you | | | |

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| ebtor 1 | Khafilu | M | Oshodi | Case number <i>(if knowr</i> | n) | |
|----------|--|--|--|------------------------------|-----------------------------------|---------------------|
| | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| . Wit | thin 2 years before you fil | led for bankruptcy, did | l you give any gifts or contributions v | vith a total value o | f more than \$600 | to any charity? |
| | No | | | | | |
| ✓ | | | | | | |
| | Yes. Fill in the details for | r each gift or contributi | on. | | | |
| | Gifts or contributions t | o charities | Describe what you contributed | | Date you | Value |
| | that total more than \$6 | | | | contributed | |
| | | | | | | |
| | <u> </u> | | _ | | | |
| | Charity's Name | | | | | |
| | | | _ | | | |
| | | | | | | |
| | Number Street | | - | | | |
| | | | | | | |
| | City State | Zip Code | - | | | |
| | , | | | | | |
| rt 6· | List Certain Losses | | | | | |
| gar ✓ | mbling? No Yes. Fill in the details. | | | | | |
| | Describe the property y | vou lost and | Describe any insurance covera | ge for the loss | Date of your | Value of property |
| | how the loss occurred | , | Include the amount that insurance | | loss | lost |
| | | | pending insurance claims on line | | | |
| | | | A/B: Property. | | | |
| | | | | | | |
| | | | | | | - |
| . J. | List Certain Payment | to or Tropoforo | | | | |
| abo | out seeking bankruptcy o | or preparing a bankrup | you or anyone else acting on your be tcy petition? or credit counseling agencies for service | | | anyone you consulte |
| abo | out seeking bankruptcy o lude any attorneys, bankru No | or preparing a bankrup | tcy petition? | | | anyone you consulte |
| abo | out seeking bankruptcy of lude any attorneys, bankrup | or preparing a bankrup | tcy petition? | | | anyone you consulte |
| abo | out seeking bankruptcy o lude any attorneys, bankru No | or preparing a bankrup | tcy petition? | s required in your ba | | anyone you consulte |
| abo | out seeking bankruptcy o lude any attorneys, bankru No | or preparing a bankrup | tcy petition? or credit counseling agencies for service | s required in your ba | nkruptcy. | |
| abo | out seeking bankruptcy o lude any attorneys, bankru No | or preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any pro | s required in your ba | nkruptcy. Date payment | Amount of |
| abo | out seeking bankruptcy of lude any attorneys, bankru No Yes. Fill in the details. | or preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy of lude any attorneys, bankrupton No Yes. Fill in the details. Semrad Law Firm | or preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any pro | s required in your ba | Date payment or transfer | Amount of |
| abo | but seeking bankruptcy of lude any attorneys, bankrupteys, bankrupteys | or preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy of lude any attorneys, bankrupteys, bankrupteys | or preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy of lude any attorneys, bankrupted any attorneys | or preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy of lude any attorneys, bankrupteys, bankrupteys | or preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 5101 Washington Street Number Street Unit 29 | or preparing a bankrup ptcy petition preparers, c | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 5101 Washington Street Number Street Unit 29 Gumee Illinoi | pr preparing a bankrup ptcy petition preparers, c | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 5101 Washington Street Number Street Unit 29 | pr preparing a bankrup ptcy petition preparers, c | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 5101 Washington Street Number Street Unit 29 Gumee Illinoi | pr preparing a bankrup ptcy petition preparers, construction preparers, constr | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 5101 Washington Street Number Street Unit 29 Gumee Illinoi City State | pr preparing a bankrup ptcy petition preparers, construction preparers, constr | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 5101 Washington Street Number Street Unit 29 Gumee Illinoi City State | pr preparing a bankrup ptcy petition preparers, control preparers, con | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 5101 Washington Street Number Street Unit 29 Gumee Illinoi City State Email or website address | pr preparing a bankrup ptcy petition preparers, control preparers, con | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |
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| abo | Semrad Law Firm Person Who Was Paid 5101 Washington Street Number Street Unit 29 Gurnee Illinoi City State Email or website address Person Who Was Paid Number Street Vint 29 City State City State City State | s 60031 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any protransferred | s required in your ba | Date payment or transfer was made | Amount of payment |

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| Debt | | Khafilu First Name | M Middle Name | Oshodi Last Name | Case number (if known) | | |
|------|-------------|---|--|---|--------------------------------------|-----------------------------------|------------------------------|
| 17. | help | p you deal with your creditors not include any payment or trans | or to make payment | | oehalf pay or transfer | any property to ar | nyone who promised to |
| | Ш | Yes. Fill in the details. | | Description and value of any p transferred | property | Date payment or transfer was made | Amount of payment |
| | | Person Who Was Paid Number Street | | | | | |
| | | City State | Zip Code | | | | |
| 18. | the Incl | ordinary course of your busin | ess or financial affai transfers made as secu | urity (such as the granting of a sec | | | |
| | | res. I ili ili ule details. | | Description and value of any property transferred | Describe any payments re in exchange | property or ceived or debts pa | Date transfer was made |
| | | Person Who Received Transfer Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person Who Received Transfer Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| 19. | ben | hin 10 years before you filed for leficiary? ese are often called asset-protect | | ou transfer any property to a se | If-settled trust or sim | ilar device of whic | :h you are a |
| | ✓ | No Yes. Fill in the details. | | Description and value of the | property transferred | | Data |
| | | | | Description and value of the | property transferred | | Date transfer was made |
| | | Name of trust | | | | | |

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Debtor 1 Khafilu Oshodi М Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number

City

State

State

Zip Code

City

Zip Code

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Debtor 1 Khafilu Oshodi Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | | Khafilu | | М | | shodi | Case | e number <i>(it</i> | known) | | |
|------|------|---|-----------------------------------|--------------------|----------------|-----------------|------------------------------------|---------------------|---------------|-----------------|----------------------------------|
| | | First Name | | Middle Name | La | st Name | | | | | |
| 26. | Hav | e you been a part | y in any judic | ial or administ | rative proce | eding under | any environmen | tal law? In | clude settlen | nents and orde | ers. |
| | Ħ | Yes. Fill in the det | tails. | | | | | | | | |
| | | | | | Court or ag | jency | | Nature o | of the case | | Status of the case |
| | | Case title | | | | | | | | | Pending |
| | | | | | Court Name | | | | | | On appeal |
| | | Case number | | | NumberStre | et | | | | | Concluded |
| | | 1 | | _ | City | State | Zip Code | | | | |
| Part | 11: | Give Details Al | bout Your B | Susiness or C | onnections | s to Any Bu | siness | | | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, di | d you own a | business or | have any of the | following c | onnections t | o any business | s? |
| | | A member of A partner in a | f a limited liab a partnership | ility company (l | LLC) or limite | ed liability pa | activity, either furtnership (LLP) | ull-time or p | oart-time | | |
| | | _ | | f the voting or 6 | - | | ooration | | | | |
| | | _ | | | | | | | | | |
| | | No. None of the a Yes. Check all tha | | | | w for each h | u Jeinoee | | | | |
| | Ш | res. Check all the | атарріу ароч | re and illi in the | | | re of the busine | 00 | Employer | dontification n | umber Do not |
| | | | | | Desc | inde the hatt | ire of the busine | 33 | | | umber or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | — Name | of accounts | ant or bookkeep | Ar | Dates busi | ness existed | |
| | | City | State | Zip Code | _ | or account | ant of Bookkoop | | From | To | |
| | | | | | | | | | | | |
| | | | | | Desc | ribe the natu | re of the busine | SS | | | number Do not umber or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | City | State | Zip Code | Name | of account | ant or bookkeep | er | _ | _ | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | Desc | ribe the natu | ire of the busine | ss | | | number Do not number or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | - | | | Name | e of account | ant or bookkeep | er | | | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Debt | or 1 Khafilu | | М | Oshodi | Case number (if known) |
|--------|-------------------------------------|--------------------|---|--------------------------------|--|
| | First Name | | Middle Name | Last Name | |
| 28. | Within 2 years be creditors, or oth | | r bankruptcy, did y | ou give a financial statem | ent to anyone about your business? Include all financial institutions, |
| | | ne details below. | | | |
| | _ | | | Date issued | |
| | Name | | | MM/DD/YYYY | - |
| | | | | <u> </u> | |
| | Number S | street | | | |
| | City | State | Zip Code | <u> </u> | |
| Part | 12: Sign Belo | w | | | |
| t | rue and correct. | I understand that | t making a false st les up to \$250,000, | atement, concealing prope | nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | . | Signature of Debto | | | Signature of Debtor 2 |
| | ı | Date 3/13/2017 | | | Date |
| [[| No Yes Did you pay or ag | ree to pay somed | | f Financial Affairs for Indivi | |
| L | Yes. Name of | person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Khafilu M Oshodi | Case No. | |
|-------|---|---|------------------------------|
| _ | Debtor | | (If known) |
| | | Chapter | Chapter 13 |
| | DISCLOSURE OF COMPE | ENSATION OF ATTORNEY F | OR DEBTOR |
| 1. | | . 2016(b), I certify that I am the attorney for the abo he filing of the petition in bankruptcy, or agreed to r(s) in contemplation of or in connection w ith the | be paid to me, for services |
| | For legal services, I have agreed to accept | | \$4,000.00 |
| | Prior to the filing of this statement I have received | I | \$500.00 |
| | Balance Due | | \$3,500.00 |
| 2. | The source of the compensation paid to me was: | | |
| | Debtor | Other (specify) | |
| 3. | The source of the compensation paid to me is: | | |
| | Debtor | Other (specify) | |
| 4. | I have not agreed to share the above-disclose members and associates of my law firm. | ed compensation with any other person unless the | y are |
| | | ompensation with a other person or persons who a y of the agreement, together with a list of the name tached. | |
| 5. | In return for the above-disclosed fee, I have agree a. Analysis of the debtor's financial situation bankruptcy; | d to render legal service for all aspects of the bank , and rendering advice to the debtor in determining | |
| | b. Preparation and filing of any petition, scho | edules, statements of affairs and plan which may b | pe required; |
| | c. Representation of the debtor at the meeting | ng of creditors and confirmation hearing, and any a | adjourned hearings thereof; |
| | d. Representation of the debtor in adversary | proceedings and other contested bankruptcy matt | ters; |
| 6. | By agreement with the debtor(s), the above-disclo | sed fee does not include the following services: | |
| | | | |
| | | CERTIFICATION | |
| | certify that the foregoing is a complete statement cor(s) in this bankruptcy proceedings. | of any agreement or arrangement for payment to n | ne for representation of the |
| | 3/13/2017 | /s/ Nathan Delman | |
| | Date | Signature of Attorney | |
| | | Semrad Law Firm | |
| | | Name of law firm | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor:
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and

necessary to represent client's interest absent any extraordinary circumstance.

- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$61.76
- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$3,500.00; and \$61.76 for expenses, leaving a balance due of \$3,561.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 3/13/2017 | |
|----------|-------------|------------------------|
| Signed: | : | ℓ |
| /s/ Khaf | filu Oshodi | |
| | - $(1A)$ | /s/ Nathan Delman |
| Debtor(| s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

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A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

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- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney*. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$61.76
- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$3,500.00; and \$61.76 for expenses, leaving a balance due of \$3,561.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 3/13/2017 | |
|----------|-------------|------------------------|
| Signed: | : | |
| /s/ Khat | filu Oshodi | |
| | | /s/ Nathan Delman |
| Debtor(| s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1 717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Oshodi, Khafilu M | Case No. | Case No | | | | | |
|----------------|--|---|--------------------------------------|--|--|--|--|--|
| | Debtor(s) | | | | | | | |
| | | Chapter. | Chapter13 | | | | | |
| | VERIFICA | TION OF CREDITOR MAT | TRIX | | | | | |
| T knowledge | he above named Debtors hereby verify th e. | at the attached list of creditors is tr | rue and correct to the best of their | | | | | |
| Date: | 3/13/2017 | /s/ Oshodi, Khat | | | | | | |
| | | Oshodi, Khafilu Sianature of Deb | | | | | | |

TTL FIN AC 4530 S Archer Ave Chicago, IL, 60632

CERTIFIED SERVICES INC 1733 WASHINGTON ST STE 2 WAUKEGAN, IL, 60085

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD STE 4 CHICAGO, IL, 60606

NORTHWEST COLLECTORS 3601 ALGONQUIN RD STE 23 ROLLING MEADOWS, IL, 60008

NW COLLECTOR 3601 ALGONQUIN RD SUITE 232 ROLLING MEADOW, IL, 60008

CREDITORS DISCOUNT & A 415 E MAIN ST STREATOR, IL, 61364

MERCHANTS CR 223 W JACKSON ST SUITE 900 CHICAGO, IL, 60606

COMNWLTH FIN 960 N MAIN STREET SCRANTON, PA, 18508

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, IL, 60181

People's Gas 130 E. Randolph Drive Chicago, IL, 60601

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

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TMobile P.O. Box 742596 Cincinnati, OH, 45274

Lake View Towers Residents 4550 N Clarendon Ave Chicago, IL, 60640

IL Secretary of State 2701 S. Dirksen Parkway Springfield, IL, 62723

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| Debtor 1 Khafilu First Name | | shodi ast Name | Case number (if known) | |
|---|--|---|--|--|
| | estions for Reporting Purposes | in more | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or in No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you | primarily for a persona business debts? Business debts? | al, family, or household iness debts are debts th the operation of the bus | purpose." at you incurred to obtain siness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | 7. Do you estimate that | after any exempt property distribute to unsecured cr | vis excluded and administrative editors? |
| 18. How many creditors do you estimate that you owe? | 1-49 50-99 100-199 200-999 | 1,000-5,000 5,001-10,00 10,001-25.0 | 00 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | | \$50,000,00 | -\$10 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | | \$50,000,00 | -\$10 million 1-\$50 million 1-\$100 million 01-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | | |
| For you | of title 11, United States Code. under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance will understand making a false state. | apter 7, I am aware the I understand the relief of I did not pay or agreemed and read the notice that the chapter of title ement, concealing proase can result in fines 1519, and 3571. | at I may proceed, if eligit available under each of e to pay someone who is be required by 11 U.S.C. 11, United States Code, operty, or obtaining mor | ble, under Chapter 7, 11,12, or 13 napter, and I choose to proceed s not an attorney to help me fill § 342(b). I specified in this petition. They or property by fraud in risonment for up to 20 years, or |

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| Fill in this infor | mation to identify your c | ase: | | | |
|---------------------------------|---|----------------------------|--|---|--------------------------------------|
| Debtor 1 | Khafilu | M | Oshodi | 1 | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | 1 1 1 D - 1 1 | 1 4 M | _ | |
| | | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for the: | Northern | District of Illinois | → | |
| Case number | | | (State) | | |
| (It known) | | | | | _ |
| Official | Form 106De | C | | | Check if this is a amended filing |
| Declarat | ion About an | Individual Debt | or's Schedules | | 12/1 |
| If two married | naanla ara filina tagath | or both are agually respon | sible for supplying correct | information | |
| U.S.C. §§ 152, | 1341, 1519, and 3571. n Below | | | | |
| Did you p | ay or agree to pay some | one who is NOT an attorne | ey to help you fill out bankri | uptcy forms? | |
| . 🔽 No | | | | | |
| Yes. | Name of person | | Attach Bankruptcy Per Signature (Official For | tition Preparer's Notice, Declaration, and m 119). | j |
| | | | | | |
| | | | | | |
| | nalty of perjury, I declar are true and correct. | e that I have read the sum | mary and schedules filed w | ith this declaration and | |
| /s/ Khafi | | | * | | |
| Signature | of Debtor 1 | | Signature o | of Debtor 2 | |

MM/DD/YYYY

Date 3/13/2017

MM/DD/YYYY

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| | Khafilu | M | Oshodi | Case number (if known) |
|-----------------|---|--|----------------------------|--|
| | First Name | Middle Name | Last Name | |
| | hin 2 years before you ditors, or other partie | | you give a financial state | ment to anyone about your business? Include all financial institution |
| 빔 | Yes. Fill in the details | s below. | | |
| | | | Date issued | |
| | Name | | MM/50/YYYY | |
| | Number Street | | _ | |
| | City | State Zip Code | | |
| | v | • | | |
| | | | | |
| I hav | e read the answers o | n this Statement of Financ | ial Affairs and any attacl | nments, and I declare under penalty of perjury that the answers are |
| true | and correct. I unders | tand that making a false st | tatement, concealing pro | nments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| true | and correct. I unders nkruptcy case can res | tand that making a false s sult in fines up to \$250,000 | tatement, concealing pro | nments, and I declare under penalty of perjury that the answers are sperty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| true | and correct. I unders nkruptcy case can res | tand that making a false st | tatement, concealing pro | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| true | and correct. I unders nkruptcy case can res | tand that making a false sisult in fines up to \$250,000 afilu Oshod | tatement, concealing pro | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| true : a bar | and correct. I unders hkruptcy case can res /s/ Kh Signature Date 3/1 | afilu Oshod of Debtor 1 3/2017 | tatement, concealing pro | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 |
| true a bar | and correct. I unders hkruptcy case can res /s/ Kh Signature Date 3/1 | afilu Oshod of Debtor 1 3/2017 | tatement, concealing pro | sperty, or obtaining money or property by fraud in connection with to 20 years, or both, 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date |
| Did y | and correct. I unders hkruptcy case can res /s/ Kh Signature Date 3/1. rou attach additional | afilu Oshod of Debtor 1 3/2017 | tatement, concealing pro | sperty, or obtaining money or property by fraud in connection with to 20 years, or both, 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date |
| Did y | and correct. I unders hkruptcy case can res /s/ Kh Signature Date 3/1: rou attach additional | afilu Oshod of Debtor 1 3/2017 | tatement, concealing pro | Signature of Debtor 2 Date Date Date Debtor Bankruptcy (Official Form 107)? |
| Did y | and correct. I unders hkruptcy case can res /s/ Kh Signature Date 3/1: rou attach additional | tand that making a false sisult in fines up to \$250,000 afiliu Oshodi of Debtor 1 3/2017 pages to Your Statement of | tatement, concealing pro | Signature of Debtor 2 Date Date Date Debtor Bankruptcy (Official Form 107)? |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re; | Oshodi, Khafilu M | Case No. | |
|-----------------|---|--|--------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter13 |
| | VERIF | ICATION OF CREDITOR MA | TRIX |
| TI knowledge | ne above named Debtors hereby ver e. | ify that the attached list of creditors is t | rue and correct to the best of their |
| Date: | 3/13/2017 | /s/ Oshodi, Kha | ifilu M |
| | | Oshodi, Khafilu Signature of De | · · |

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| М | | | Oshoo | | | _ Case | a number . | if known) | | | |
|---------------|----------------------------|----------------------------|--|-----------------|-----------|---------|--------------|--------------|---------------------------|------------|-----------------|
| Mic | Middle Na | ame | Last N | ame | | _ | | _ | | | • |
| come | ome that | l applies t | to you. Follow | these steps: | | | | | | | |
| live. | live. | | Illinois | | | | | | | | |
| in you | in your hou | usehold. | 3 | | | | | | | | |
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| o to P | to Part 3 | and fill o | of page 1 of thi out Calculation on line 14 abov | n of Disposa | | | | | | | |
| ment | nent Per | riod Unde | er 11 U.S.C. | . §1325(b)(| (4) | | | | | | |
| ily inc | y income | from line | 11. | | | | | | | | \$1,193.00 |
| | | | are married, yo ws you to ded | | | | | | | | |
| es not | s not apply | y, fill in 0 o | on line 19a. | | | | | | | | - <u>\$0.00</u> |
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| | | | | C | Date | | | | | | |
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| fill out | fill out or fil | ile Form 12 | 22C-2. | | • | | | MM/DD/YYYY | | | |

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.